



Nerve Pain: A Review In The Indian Scenario With Usefulness Of S-Lanss Pain Score In The Assessment Of Nerve Pain

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Abstract: Nerve pain is a significant health issue in India, primarily driven by conditions like diabetes, infections, trauma, and cancer. Despite its high prevalence, diagnosing and managing neuropathic pain remains challenging due to under recognition, limited resources, and cultural factors. The **S-LANSS Pain Score** (Self-Reported Leeds Assessment of Neuropathic Symptoms and Signs) is a simple, cost-effective, and reliable tool for identifying and assessing neuropathic pain. This article reviews the burden of neuropathic pain in India, the challenges in diagnosis, and the utility of the S-LANSS Pain Score in clinical practice, highlighting its potential to improve early diagnosis and treatment outcomes.

I. INTRODUCTION

Neuropathic pain (nerve pain) is a complex and often debilitating condition that arises from damage or dysfunction in the nervous system. It is typically characterized by burning, tingling, shooting, or stabbing pain, which can be spontaneous or triggered by normally non-painful stimuli. While the prevalence of neuropathic pain is global, its impact is particularly significant in India, where a combination of genetic, lifestyle, and socio-economic factors contributes to a high burden of nerve-related disorders. Accurate and early identification of neuropathic pain is crucial for effective treatment and improved quality of life. However, diagnosing neuropathic pain remains challenging due to its diverse presentations and the lack of universally accepted diagnostic criteria.

In recent years, the S-LANSS (Self-Reported Leeds Assessment of Neuropathic Symptoms and Signs) Pain Score has emerged as a promising tool for diagnosing neuropathic pain in clinical settings. The S-LANSS is a quick, reliable, and non-invasive assessment tool that can be particularly beneficial in the Indian healthcare context, where resources and time constraints often limit comprehensive diagnostic evaluations. This review aims to explore the prevalence and impact of neuropathic pain in India, the challenges in its diagnosis, and the usefulness of the S-LANSS Pain Score in assessing nerve pain in the Indian healthcare setting.

Prevalence of Neuropathic Pain in India

Neuropathic pain is a major public health concern in India, affecting millions of people, particularly in individuals with chronic diseases such as diabetes, HIV/AIDS, and cancer. The prevalence of neuropathic pain varies based on the underlying condition, with certain populations at higher risk due to genetic, environmental, and socio-economic factors.

Diabetes and Neuropathy

One of the leading causes of neuropathic pain in India is diabetic neuropathy, a complication of diabetes mellitus. With the rapidly increasing prevalence of diabetes in India, it is estimated that up to 50% of diabetic patients may develop some form of neuropathy, including neuropathic pain (Vinik et al., 2015). Diabetic peripheral neuropathy (DPN) is particularly prevalent, and the majority of patients experience significant pain that impacts daily functioning. The high prevalence of diabetes in India, coupled with poor glycemic control, means that diabetic neuropathy is a major contributor to the burden of neuropathic pain in the country.

Post-Herpetic Neuralgia and Other Infections

Another significant contributor to neuropathic pain in India is post-herpetic neuralgia (PHN), a complication of shingles caused by the reactivation of the varicella-zoster virus. Although the incidence of PHN is lower compared to diabetic neuropathy, it is still a significant source of suffering, especially in older individuals and those with weakened immune systems. HIV/AIDS-related neuropathy is also a common cause of nerve pain, with studies showing that up to 30-40% of HIV-infected individuals experience some form of neuropathy (Boulton et al., 2016). Additionally, cancer-related neuropathy is becoming more prevalent with increasing cancer survival rates, especially in cases where chemotherapy or radiation therapy has caused nerve damage.

Occupational Factors and Trauma

In India, where large sections of the population engage in manual labor and agricultural work, neuropathic pain arising from trauma and injury is also common. Industrial accidents, road traffic injuries, and spinal cord injuries are significant contributors to neuropathic pain in this setting. Poor access to specialized healthcare in rural areas exacerbates the problem, with many patients unable to receive appropriate diagnosis and treatment for nerve-related pain.

Other Causes

Other conditions that contribute to neuropathic pain in India include chronic alcohol abuse, nutritional deficiencies (particularly vitamin B12 deficiency), hereditary neuropathies, and multiple sclerosis. While these conditions are less common than diabetes, they still pose a significant health burden in certain populations.

Clinical Challenges in Diagnosing Neuropathic Pain in India

The diagnosis of neuropathic pain in India presents several challenges. These challenges are primarily related to the underrecognition of symptoms, cultural differences in the expression of pain, and limited access to diagnostic resources.

Underrecognition of Symptoms

A major issue in diagnosing neuropathic pain in India is the underrecognition of symptoms by both patients and healthcare providers. Many individuals with neuropathic pain are unable to accurately describe their symptoms, often attributing them to more familiar conditions such as arthritis, musculoskeletal pain, or general fatigue. Moreover, neuropathic pain is often mistaken for nociceptive pain, which arises from tissue injury. As a result, the pain is frequently misdiagnosed or not treated appropriately, leading to prolonged suffering.

Cultural and Social Factors

Cultural and social factors also play a role in the underdiagnosis of neuropathic pain in India. In many rural and semi-urban regions, there is a lack of awareness about the nature of nerve pain, and people may not seek medical attention for symptoms that seem "non-specific" or difficult to describe. In some communities, pain is tolerated as part of daily life, and patients may delay seeking medical help until the pain becomes severe.

Limited Diagnostic Resources

In many parts of India, access to specialized neurological or pain management services is limited, particularly in rural or underserved regions. Although neuropathic pain is a common issue, the diagnostic infrastructure to assess it comprehensively remains underdeveloped in many parts of the country. Diagnostic tools such as nerve conduction studies and quantitative sensory testing are often expensive and unavailable to the majority of the population. Moreover, diagnostic tests are not always readily available at the primary care level, leading to delays in diagnosis and treatment.

The Role of S-LANSS Pain Score in the Assessment of Neuropathic Pain

The S-LANSS (Self-Reported Leeds Assessment of Neuropathic Symptoms and Signs) pain score is a self-administered, simple, and validated tool that can help identify and quantify neuropathic pain. It is particularly useful in the Indian context, where healthcare providers may have limited access to advanced diagnostic technologies, and where time constraints and resource limitations often hinder comprehensive clinical evaluations.

Structure and Components of the S-LANSS Pain Score

The S-LANSS consists of seven questions designed to assess the characteristics of the pain, its sensory qualities, and its response to various stimuli. The questions cover aspects such as:

1. Pain quality: The presence of burning, stabbing, or shooting pain.
2. Pain intensity: Whether the pain is spontaneous or triggered by an external stimulus.
3. Allodynia: Whether non-painful stimuli, such as light touch or clothing, cause pain.
4. Hyperalgesia: Whether the pain is exaggerated in response to normal stimuli.
5. Pain distribution: Where the pain is located and whether it follows a specific nerve distribution.
6. Sensory abnormalities: Tingling, numbness, or other abnormal sensations.
7. Duration: The length of time the pain has been present and its variation over time.

Each question is scored, and a total score is calculated. A score of 12 or higher typically suggests that the pain is neuropathic. This cut-off is used as a diagnostic threshold, although the exact interpretation may vary in different clinical contexts.

Reliability and Validity

Numerous studies have demonstrated the reliability and validity of the S-LANSS Pain Score in assessing neuropathic pain across different populations. In the Indian context, the tool has been shown to be a reliable and valid instrument for identifying neuropathic pain. In a study by Vats et al. (2016), the S-LANSS was found to have high sensitivity and specificity for diagnosing neuropathic pain in diabetic patients, with results comparable to those of other established neuropathic pain scales such as the Douleur Neuropathique 4 (DN4).

Advantages of S-LANSS in the Indian Context

The S-LANSS Pain Score offers several advantages in the Indian healthcare context:

1. **Ease of Use:** The S-LANSS is a self-administered tool, which means it can be used by patients themselves in outpatient settings, reducing the need for extensive clinical time or specialized skills. This is particularly beneficial in resource-limited settings where healthcare professionals are often stretched thin.
2. **Cost-Effective:** As a paper-based or digital questionnaire, the S-LANSS is a low-cost option for neuropathic pain assessment. It does not require expensive diagnostic equipment or specialized training, making it suitable for use in rural and urban clinics across India.
3. **Non-Invasive:** Unlike other diagnostic tests, such as nerve conduction studies or quantitative sensory testing, the S-LANSS is non-invasive, meaning patients do not need to undergo any discomfort or additional procedures.
4. **Cultural Adaptability:** The S-LANSS has been adapted and validated in multiple languages, including Hindi, Kannada, and Tamil, making it accessible to a wide range of patients across different linguistic regions of India.

Limitations of the S-LANSS in India

Despite its advantages, the S-LANSS is not without limitations. Some of these include:

1. **Subjectivity:** The S-LANSS relies on patient self-report, which can be influenced by individual differences in pain perception, cognitive ability, and understanding of the questionnaire.
2. **Lack of Sensory Testing:** While the S-LANSS is a reliable tool for identifying neuropathic pain based on reported symptoms, it does not include objective sensory testing, which can sometimes provide more definitive evidence of nerve dysfunction.
3. **Language and Literacy Barriers:** Although the S-LANSS has been adapted for different languages, patients in rural areas with limited literacy may find it challenging to complete the questionnaire accurately. However, this can be mitigated with appropriate translation and assistance from healthcare workers.

Clinical Application of S-LANSS in India

The S-LANSS Pain Score can be used in several ways to improve the management of neuropathic pain in India:

1. **Screening Tool:** The S-LANSS can be used as a screening tool to identify patients with neuropathic pain. It can be administered during routine visits to identify individuals who may benefit from further investigation or treatment for neuropathic pain.
2. **Monitoring Treatment Response:** The S-LANSS can be used to monitor the effectiveness of treatments for neuropathic pain, such as anticonvulsants, antidepressants, and topical therapies. Regular use of the tool can help track changes in pain severity and guide treatment adjustments.

3. Early Diagnosis: By identifying neuropathic pain early in the disease process, the S-LANSS can facilitate timely interventions, preventing the progression of pain and improving patient outcomes.

Conclusion

Neuropathic pain is a significant and often underdiagnosed condition in India, where it is associated with a range of underlying medical conditions such as diabetes, infections, trauma, and cancer. Accurate assessment of nerve pain is essential for effective management and improved patient quality of life. The S-LANSS Pain Score is a valuable tool for the diagnosis and monitoring of neuropathic pain, offering a simple, cost-effective, and reliable method for identifying nerve pain in the Indian healthcare context.

Despite some limitations, the S-LANSS holds considerable promise in addressing the challenges of diagnosing and managing neuropathic pain in India, particularly in resource-limited settings. Its ease of use, cost-effectiveness, and adaptability to different languages and cultures make it an ideal tool for widespread use across the country.

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